

TFW

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CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, PO Box 1450, Alexandria, VA, 22313-1450 on 8 June 2006

Jeannie Camara

(Typed or Printed Name of Person Mailing Paper or Fee)

Jeannie Camara

(Signature of Person Mailing Paper or Fee)



PATENT APPLICATION
Attorney Docket No. SUN-P7133-RA

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE PATENT APPLICATION OF

Partha P. Tirumalai

) Examiner: Fowlkes, Andre R.

Serial No. 10/052,999

) Group Art Unit: 2122

Filing Date: 2 November 2001

)

Title: METHOD AND APPARATUS FOR
INSERTING PREFETCH INSTRUCTIONS
IN AN OPTIMIZING COMPILER

)

)

)

AMENDMENT TRANSMITTAL LETTER

Mail Stop: Amendment

Assistant Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In connection with the above-referenced U. S. patent application, transmitted herewith are the following papers:

- [x] Response under 37 C.F.R. § 1.111 to official action mailed 19 May 2006.
- [] A petition for extension of time is also enclosed with a fee of \$55.00 for a one-month extension for a small entity.
- [] Terminal disclaimer under 37 C.F.R. § 1.321(c), including
 - [] check for \$110.00 fee under 37 C.F.R. § 1.20(d), and
 - [] 2 certificates under 37 C.F.R. § 3.73(b).
- [] Information disclosure statement, form 1449 and ___ references.
- [x] No additional claims fees are required.

[] An additional fee is required, and is calculated as shown below:

AMENDED CLAIMS					
	NO. OF CLAIMS	HIGHEST NO. OF CLAIMS PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	ADDTL FEE
Total Claims		MINUS = 20	0	x \$18 =	
Independent Claims		MINUS = 3	0	x \$78 =	
If Amendment adds multiple dependent claims, add \$260.00					
Total Amendment Fee					
If small entity status is claimed, subtract 50% of Total Amendment Fee					
TOTAL ADDITIONAL FEE DUE FOR THIS AMENDMENT					\$0.00

- [] A check in the amount of \$____ is enclosed.
[] Charge \$____ to Deposit Account No. ____ (Docket No. ____).
[x] Please deduct any underpayments, credit any overpayments, and charge all required extension of time fees to Deposit Account Number 50-1003. (Docket No. SUN-P7133).

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Respectfully submitted,

By



Edward J. Grundler
Registration No. 47,615

Date: 8 June 2006



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Application Number	:	10/052,999	Confirmation Number:	1267
Applicant	:	Partha P. Tirumalai		
Filed	:	November 2, 2001		
TC/A.U.	:	2192		
Examiner	:	Fowlkes, Andre R.		
Docket Number	:	SUN-P7133-RA		
Customer No.	:	57,960		

M/S: Box Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria VA 22313-1450

AMENDMENT

Sir

In response to the office action of **19 May 2006**, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 8 of this paper.